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Bib Data Sheet

CONFIRMATION NO. 3676

|  |   |                               |   |  |                                |
|--|---|-------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/468,471   | <b>FILING DATE</b><br>12/21/1999<br><b>RULE</b>   | <b>CLASS</b><br>422           | <b>GROUP ART UNIT</b><br>3762   | <b>ATTORNEY DOCKET NO.</b><br>THOX:0021--1 |                                |
| <b>APPLICANTS</b><br>VINCENT DIVINO, JR., MISSION VIEJO, CA;<br>WILLIAM R. PATTERSON, IRVINE, CA;<br>JEFFREY L. CREECH, LOS ANGELES, CA;<br>STEPHEN E. MYRICK, TUSTIN, CA;   |   |                               |   |  |                                |
| <b>** CONTINUING DATA *****</b><br>THIS APPLICATION IS A CON OF 09/410,344 09/30/1999  |   |                               |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE</b><br><b>GRANTED ** 01/28/2000</b> <b>** SMALL ENTITY **</b>   |   |                               |   |  |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Acknowledged <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Examiner's Signature <i>[Signature]</i> Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>14   | <b>TOTAL CLAIMS</b><br>39                  | <b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>27405  |   |                               |   |  |                                |
| <b>TITLE</b><br>METHOD OF FORMING GAS-ENRICHED FLUID   |   |                               |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>590  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |